REPORT - HIPAA 834 to CCDB mapped fields only

Loop	*SegID*	*HIPAA Name*	*DT*	*Req*	*File*	*Field*	*DT*	*Comment*	*CommentType*
		Benefit Enrollment and Maintenance						CCDB does the enrollment and counties get client enrollment information from CCDB and send to providers once a month.	Translation
	ST	**Transaction Set Header**		R					
	BGN	**Beginning Segment**		R					
	REF	**Transaction Set Policy Number**		S					
	DTP	**File Effective Date**		S					
1000A	*N 1*	***Sponsor Name***		*R*					
1000A	**N 1**	**Sponsor Name**		**R**					
1000A	N 102	Plan Sponsor Name	AN60	S				Hard Code "Division of Developmental Disabilities"	Translation
1000A	N 103	Identification Code Qualifier	ID2	R				Hard Code "FI"-Federal Tax ID	Translation
1000A	N 104	Sponsor Identifier	AN80	R				Hard Code DDD's Tax ID	Translation
1000B	*N 1*	***Payer***		*R*					
1000B	**N 1**	**Payer**		**R**					
1000B	N 102	Insurer Name	AN60	S				Hard Code "Division of Developmental Disabilities"	Translation
1000B	N 103	Identification Code Qualifier	ID2	R				Hard Code "FI"-Federal Tax ID	Translation
1000B	N 104	Insurer Identification Code	AN80	R				Hard Code DDD's Tax ID	Translation
1000C	*N 1*	***TPA/Broker Name***		*S*					

Loop	SegID	HIPAA Name	DT	Req	File	Field	DT	Comment	CommentType
1000C	**N 1**	**TPA/Broker Name**		**S**					
1100C	*ACT*	*TPA/Broker Account Information*		*S*					
1100C	**ACT**	**TPA/Broker Account Information**		**S**					
2000	*INS*	*Member Level Detail*		*R*					
2000	**INS**	**Member Level Detail**		**R**					
2000	INS10	Handicap Indicator	ID1	S	Assigned Disability Code	Disability Code	smallint		
2000	INS12	Insured Individual Death Date	AN35	S	Client History	Status Begin Date	datetime	Use Status Begin Date when the Status Code is deceased.	Translation
2000	**REF**	**Subscriber Number**		**R**					
2000	REF02	Subscriber Identifier	AN30	R	Client	Client_ID_C	int	This is CCDB Client ID. Do we need to use PIC code?	System Questions
2000	**REF**	**Member Policy Number**		**S**					
2000	**REF**	**Member Identification Number**		**S**					
2000	REF02	Subscriber Supplemental Identifier	AN30	R	Client	Case_Number	char(13)		
2000	**REF**	**Prior Coverage Months**		**S**					
2000	**DTP**	**Member Level Dates**		**S**					
2000	DTP03	Status Information Effective Date	AN35	R	Client	Eligibility_Date	datetime		
2100A	*NM1*	*Member Name*		*R*					
2100A	**NM1**	**Member Name**		**R**					
2100A	NM103	Subscriber Last Name	AN35	R	Client	Last_Name	varchar (30)		

Loop	SegID	HIPAA Name	DT	Req	File	Field	DT	Comment	CommentType
2100A	NM104	Subscriber First Name	AN25	R	Client	First_Name	varchar (30)		
2100A	NM105	Subscriber Middle Name	AN25	S	Client	Middle_Name	varchar (30)		
2100A	NM109	Subscriber Identifier	AN80	S	Client	Social_Security_Number	char(9)		
2100A	**PER**	**Member Communications Numbers**		**S**				If Provider_Id_CL of table Client_Location is not Null, get the phone number from the Provider_Address table; else get the phone number from Client_location.	Translation
2100A	PER04	Communication Number	AN80	R	Client_Location	Phone_Number_CL	varchar (10)		
2100A	**N 3**	**Member Residence Street Address**		**S**				If Provider_Id_CL of table Client_Location is not Null, get the address info from the Provider_Address table; else get the address info from Client_location.	Translation
2100A	N 301	Subscriber Address Line	AN55	R	Client_Location	Address_Line_1_CL	varchar (40)		
2100A	N 301	Subscriber Address Line	AN55	R	Provider_Address	Address_Line_1_PA	varchar (40)		
2100A	N 302	Subscriber Address Line	AN55	S	Client_Location	Address_Line_2_CL	varchar (40)		
2100A	N 302	Subscriber Address Line	AN55	S	Provider_Address	Address_Line_2_PA	varchar (40)		
2100A	**N 4**	**Member Residence City, State, ZIP Code**		**S**				If Provider_Id_CL of table Client_Location is not Null, get the address info from the Provider_Address table; else get the address info from Client_location.	Translation
2100A	N 401	Subscriber City Name	AN30	R	Client_Location	City_CL	varchar (40)		

Loop	SegID	HIPAA Name	DT	Req	File	Field	DT	Comment	CommentType
2100A	N 401	Subscriber City Name	AN30	R	Provider_Address	City_PA	varchar (40)		
2100A	N 402	Subscriber State Code	ID2	R	Client_Location	State_Abbvr_Id_CL	char(2)		
2100A	N 402	Subscriber State Code	ID2	R	Provider_Address	State_Abbvr_Id_PA	char(2)		
2100A	N 403	Subscriber Postal Zone or ZIP Code	ID15	R	Client_Location	Zip_Code_CL	varchar (9)		
2100A	N 403	Subscriber Postal Zone or ZIP Code	ID15	R	Provider_Address	Zip_Code_PA	varchar (9)		
2100A	N 406	Location Identification Code	AN30	S	Client_Location	County_Id_CL	smallint		
2100A	N 406	Location Identification Code	AN30	S	Service_Provider	County_Id_SP	smallint		
2100A	**DMG**	**Member Demographics**		**S**					
2100A	DMG02	Member Birth Date	AN35	R	Client	Birth_Date	datetime		
2100A	DMG03	Gender Code	ID1	R	Client	Gender	char		
2100A	DMG05	Race or Ethnicity Code	ID1	S	Client	Hispanic_Code	char(3)		
2100A	DMG05	Race or Ethnicity Code	ID1	S	Client	Primary_Ethnic_Code	char(3)		
2100A	**ICM**	**Member Income**		**S**					
2100A	**AMT**	**Member Policy Amounts**		**S**					
2100A	**HLH**	**Member Health Information**		**S**					
2100A	**LUI**	**Member Language**		**S**					
2100A	LUI02	Language Code	AN80	S	Client	Primary_Language_Code	smallint		
2100B	*NM1*	*Incorrect Member Name*		*S*					

Loop	SegID	HIPAA Name	DT	Req	File	Field	DT	Comment	CommentType
2100B	**NM1**	**Incorrect Member Name**		**S**					
2100B	**DMG**	**Incorrect Member Demographics**		**S**					
2100C	*NM1*	*Member Mailing Address*		*S*					
2100C	**NM1**	**Member Mailing Address**		**S**					
2100C	**N 3**	**Member Mail Street Address**		**S**					
2100C	N 301	Subscriber Address Line	AN55	R	Client_Location	Mailing_Addr_Line_1	varchar (40)		
2100C	N 302	Subscriber Address Line	AN55	S	Client_Location	Mailing_Addr_Line_2	varchar (40)		
2100C	**N 4**	**Member Mail City, State, Zip**		**S**					
2100C	N 401	Subscriber City Name	AN30	R	Client_Location	Mailing_City	varchar (30)		
2100C	N 402	Subscriber State Code	ID2	R	Client_Location	Mailing_State_Abbvr_Id	char(2)		
2100C	N 403	Subscriber Postal Zone or ZIP Code	ID15	R	Client_Location	Mailing_Zip_Code	varchar (9)		
2100D	*NM1*	*Member Employer*		*S*					
2100D	**NM1**	**Member Employer**		**S**					
2100D	**PER**	**Member Employer Communications Numbers**		**S**					
2100D	**N 3**	**Member Employer Street Address**		**S**					
2100D	**N 4**	**Member Employer City, State, Zip**		**S**					

Loop	SegID	HIPAA Name	DT	Req	File	Field	DT	Comment	CommentType
2100E	*NM1*	*Member School*		*S*					
2100E	NM1	Member School		S					
2100E	PER	Member School Commmunications Numbers		S					
2100E	N 3	Member School Street Address		S					
2100E	N 4	Member School City, State, Zip		S					
2100F	*NM1*	*Custodial Parent*		*S*					
2100F	NM1	Custodial Parent		S					
2100F	PER	Custodial Parent Communications Numbers		S					
2100F	N 3	Custodial Parent Street Address		S					
2100F	N 4	Custodial Parent City, State, Zip		S					
2100G	*NM1*	*Responsible Person*		*S*					
2100G	NM1	Responsible Person		S					
2100G	PER	Responsible Person Communications Numbers		S					
2100G	N 3	Responsible Person Street Address		S					
2100G	N 4	Responsible Person City, State, Zip		S					
2200	*DSB*	*Disability Information*		*S*					
2200	DSB	Disability Information		S					

Loop	SegID	HIPAA Name	DT	Req	File	Field	DT	Comment	CommentType
2200	DSB01	Disability Type Code	ID1	R	Assigned Disability Code	Disability Code	smallint	Need to map codes	Map Codes
2200	DSB01	Disability Type Code	ID1	R	Assigned Disability Code	Retardation Level Code	char	Need to map codes	Map Codes
2200	**DTP**	**Disability Eligibility Dates**		**S**					
2300	*HD*	*Health Coverage*		*S*					
2300	**HD**	**Health Coverage**		**S**					
2300	HD 04	Plan Coverage Description	AN50	S				E.g., Medicaid Personal Care (MPC) and/or DDD	Processing Logic
2300	**DTP**	**Health Coverage Dates**		**R**					
2300	DTP03	Coverage Period	AN35	R	Client_Program_Activity	Service_Begin_Date_CPA	datetime	Service_End_Date is filled in when the service is terminated.	Translation
2300	DTP03	Coverage Period	AN35	R	Client_Program_Activity	Service_End_Date_CPA	datetime	Service_End_Date is filled in when the service is terminated.	Translation
2300	**AMT**	**Health Coverage Policy**		**S**					
2300	**REF**	**Health Coverage Policy Number**		**S**					
2300	**IDC**	**Identification Card**		**S**					
2310	*LX*	*Provider Information*		*S*					
2310	**LX**	**Provider Information**		**S**					
2310	**NM1**	**Provider Name**		**R**					
2310	NM109	Provider Identifier	AN80	S				add 'county' table for county ID (1-39), county name.	System Questions
2310	**N 4**	**Provider City, State, ZIP Code**		**S**					
2310	**PER**	**Provider Communications Numbers**		**S**					

Loop	SegID	HIPAA Name	DT	Req	File	Field	DT	Comment	CommentType
2310	PLA	PCP Change Reason		S					
2320	*COB*	*Coordination of Benefits*		*S*					
2320	COB	Coordination of Benefits		S					
2320	REF	Additional Coordination of Benefits Identifiers		S					
2320	N 1	Other Insurance Company Name		S					
2320	DTP	Coordination of Benefits Eligibility Dates		S					
2320	SE	Transaction Set Trailer		R					

Comment Type Legend:

Case Management = "Nice to Have" fields for case reviewers.

Electronic COB = If we do electronic COB, these fields will be needed.

HIPAA Questions = Questions about interpreting the HIPAA Implementation Guides.

HIPAA Required = Required fields in HIPAA that don't seem to be in the legacy system.

Map Codes = Need to crosswalk local codes to standard codes.

Match Back = Fields received on an incoming transaction that must be returned in the response.

Nice to Have = Optional fields that are useful for other reasons.

Policy Issues = Decisions to be made by system experts.

Processing Logic = Logic that needs to be built into either the front end or MMIS.

System Questions = Questions about the legacy systems.

Translation = Only use to program translations.

Column Heading Legend:

"DT" = Data Type

COBOL Data Types Legend:

X(n) - Character data with length of n bytes

9(n) - Integer data with length of n bytes

S9(n) - Signed integer data with length of n bytes

9(n)V99 or 9(n)V9(2) - Numeric data with n decimal digits before the decimal point and 2 decimal digits after the decimal point

S9(n)V99 or S9(n)V9(2) - Signed numeric data with n decimal digits before the decimal point and 2 decimal digits after the decimal point

HIPAA Data Types Legend:

ANn - Free text with length of n bytes

IDn - Coded value with length of n bytes

Nn - Numeric data with length of n bytes

Rn - Real data with length of n bytes

DT8 - Date expressed as CCYYMMDD

TM8 - Time expressed as HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds ((00-99)